

God's View of You Evaluation

Date: _____

Name: _____

(optional)

How did you hear about this group?

What have you learned from this study?

What have you found most valuable about this study?

How have you been able to apply what you have learned?

Is the homework beneficial? Why or why not?

Was the small group discussion time beneficial? Why or why not?

What could be improved?

What questions about biblical worth would you like to have answered?

What suggestions/comments do you have?